



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E290226**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION ☐

CASE #	13-03056
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION 12 - 04 - 2013	1805	31		0664
N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/> IN <input checked="" type="checkbox"/> OF				

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒

91ST AVE NE BLOCK NO. ☒ 500

MILE POST ☐

DISTANCE ☐ MILES ☐ N ☐ E ☐ OF (REFERENCE OR CROSS STREET)

FEET ☐ S ☐ W ☐

UNIT 01 MOTOR VEHICLE ☒ PEDAL CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE D: 2068908979

LAST NAME SALINAS FIRST NAME CAITLYN MIDDLE INITIAL D

STREET NEW ADDRESS 9007 156TH ST SE

CITY SNOHOMISH ST WA ZIP 98296

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # SALINCD080KL STATE WA SEX F D.O.B. MMDDYYYY 05 - 13 - 1992

ON DUTY ☐ STATUS AIRBAG 3 RESTR 1 EJECT 1 HELMET USE 2 INJURY CLASS 1 NATURE OF INJURIES

LICENSE PLATE # ADP0106 STATE WA VIN# 1NXBR38E64Z286964

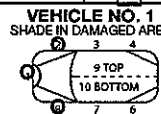
TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR 2004 MAKE TOYT MODEL COROL STYLE 4D VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. OWNED BY DRIVER

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # PROGRESSIVE 900470237

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE



UNIT 02 MOTOR VEHICLE ☒ PEDAL CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE D: 4259230952

LAST NAME MARTINSON FIRST NAME MARGARET MIDDLE INITIAL M

STREET NEW ADDRESS 11524 28TH ST NE

CITY LAKE STEVENS ST WA ZIP 98258

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # MARTIMM347L1 STATE WA SEX F D.O.B. MMDDYYYY 06 - 21 - 1966

ON DUTY ☐ STATUS AIRBAG 2 RESTR 4 EJECT 1 HELMET USE 2 INJURY CLASS 1 NATURE OF INJURIES

LICENSE PLATE # AHN2369 STATE WA VIN# 2GNFLGE57C6295583

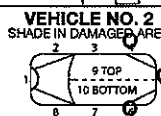
TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR 2012 MAKE CHEV MODEL EQUINOX STYLE 4H VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. OWNED BY DRIVER

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # NATIONWIDE PPNM0017440784-3

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE



OFFICER'S NAME (PRINT) JAMES WELLINGTON BADGE OR ID # 93 AGENCY WA0311900



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E290226**

CASE # **13-03056**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NARRATIVE

On 12-04-13 at 1805 hrs I responded to the 500 block of 91st Ave NE for a two car collision. It was reported as non-injury and partially blocking. Both units were traveling southbound on 91st Ave NE in the center turn lane to make a left turn. The driver of Unit 1 was following behind Unit 2 when Unit 2 stopped suddenly. Unit 1 was unable to stop in time and collided with the back of Unit 2 causing reportable damage. Driver of Unit 1 was not wearing the lap/shoulder restraint and was evaluated by aid for airbag deployment. No injuries were reported. I cleared this incident at 1836 hrs.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

JAMES WELLINGTON

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

12-05-13 02:16 AM

DATED

PLACE SIGNED

APPROVED BY

RON BROOKS 013

DATE

12/5/2013 9:03:08 AM

BADGE OR ID #

93

ORI #

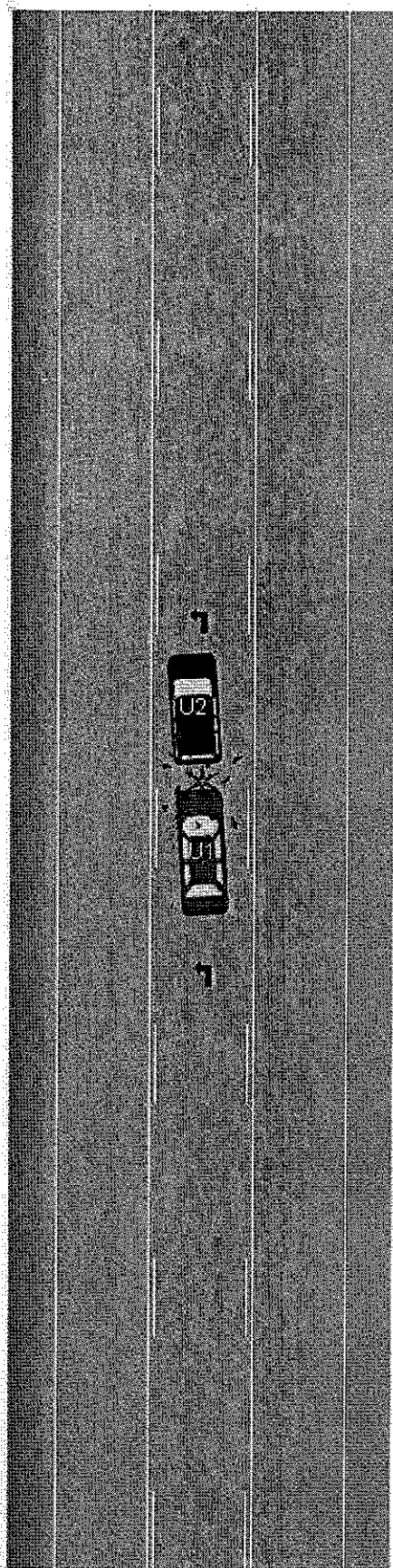
WA0311900

TIME POLICE DISPATCHED

6:05 PM

TIME POLICE ARRIVED

6:11 PM



500 Block of 91st Ave NE



Not To Scale

Incident History for: #SS13026589 Xref: #AG13003446

Case Numbers: \$SS13003056

Entered 12/04/13 18:05:03 BY SPCT03 SP0373
Dispatched 12/04/13 18:05:19 BY SPDP17 SP0166
Enroute 12/04/13 18:05:19
Onscene 12/04/13 18:11:52
Closed 12/04/13 18:36:01

Initial Type: ACCP Initial Alarm Level: Final Alarm Level:

Final Type: ACCP (ACCIDENT, PRIORITY) Pri: 1 Dispo: H

Police BLK: SS002 Fire BLK: AG1518 Map Page: 397E-1 Group: SS1 Beat: WEST

Src: T

Loc: 530 91 AV NE ,LKS btwn MARKET PL & SR 204 (V)

Loc Info:

Name: SELENA, KATELYN

Addr:

Phone: 2068908979

/1805 (SP0373) ENTRY ,CC, JO, H AND R, WHI SUV , ON 91 AV, ADV AID
/1805 (SP0166) DISPER SS1932 #SS93 WELLINGTON, OFCR (JAMES)
/1806 ASSTER SS1935 [303 91 AV NE ,LKS]
#SS104 LAMBIER, OFFICER (JEFF)
/1806 (SP0373) SUPP TXT: RP NOW SAYS DOESNT NEED AID, SUS IS SB ON 9
1
/1806 CHANGE LOC: 303 91 AV NE ,LKS --> 530 91 AV NE ,LKS,
NAM: --> SELENA, KATELYN,
PHO: --> 2068908979,
TXT: RP IN BLU '04 TOYT CORR, BLKING LANE
/1807 (SP0166) MISC ,NORTH ADV
/1808 (SP0367) MISC ,BCST NORTH
/1811 (SP0166) ONSCNE SS1932
/1812 (*****) REMINQ SS1932 ADP0106
/1812 (SP0166) REMINQ SS1932 LIC, 1932, ADP0106,,
/1812 ONSCNE SS1935
/1813 MISC SS1935 ,APPEARS OTHER HALF PULLED INTO PKLOT BY DOLLAR
TREE, NOT HIT AND RUN
/1813 MISC SS1932 ,ADULT FEMALE, CABN, AIDBAG DEPLOYEMENT, EVAL
/1814 CROSS #AG13003446
/1817 (SS93) REMINQ SS1932 MDTVEH, ADP0106,,WA,,,,,,,,,
/1818 REMINQ SS1932 MDTWANT, SALINAS, CAITLYN, D, 051392, F,,WA,,,,,,,,,
',',',
/1819 *MISC SS1932 ,U1 PHONE 206-890-8979
/1820 *MISC SS1932 ,U1 INSUR: PROGRESSIVE #900470237
/1821 (SP0166) CLEAR SS1935
/1823 (SS93) REMINQ SS1932 MDTVEH, AHN2369,,WA,,,,,,,,,
/1824 (SP0166) ASNCAS SS1932 \$SS13003056
/1825 (SS93) REMINQ SS1932 MDTWANT, MARTINSON, MARGARET, M, 062166,,WA,,,,,,,,,
',',',',
/1825 *MISC SS1932 ,U2 PHONE 425-923-0952
/1826 *MISC SS1932 ,U2 INSUR NATIONWIDE #PPNM0017440784-3
/1836 (SP0166) CLEAR SS1932 D/H
/1836 CLOSE SS1932